	ll in this information to identify your o	case:										
De	ebtor 1 Glenn E. Hi	ller		***								
1	ebtor 2 April S. Hille	er										
Ur	nited States Bankruptcy Court for the	e: MIDDLE DISTRICT (OF PENI	ISYLVANIA								
1	1:20-bk-00308 (nown)		_				✓ Ai	k if this is n amende supplem	ed filing ent sho	owina p	ostpetitio	n chapter
C	official Form 106I						13	3 income	as of th	he follo	wing date	e:
-	chedule I: Your Inc	omo					M	M / DD/ Y	YYYY			
	as complete and accurate as pos			£:!!	<u> </u>							12/1
spo	plying correct information. If you buse. If you are separated and you ach a separate sheet to this form. It 1: Describe Employment	are married and not fill Ir spouse is not filing w	ng jointi ith vou	y, and your sp	ouse	is livi	ng with	you, incl	ude in	formati	ion abou	t your
1.	Fill in your employment		Same			and the second	TRACET I		11290 Sept. 1	MET SHAPE . TO	TO BETT OF BANK	
	information.		Debto	or 1				Debtor 2	2 or no	n-filing	spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed					✓ Employed				
			Not employed					☐ Not employed				
		Occupation	Registered nurse			Registered nurse						
	Include part-time, seasonal, or self-employed work.	Employer's name	Meritus Medical Center 11116 Medical Campus Road Hagerstown, MD 21742					Frederick Memorial Hospital 400 West 7th Street Frederick, MD 21701				
	Occupation may include student or homemaker, if it applies.	Employer's address										
		How long employed to	there? 2-1/2 years				23 years					
Pai	t 2: Give Details About Mon	thly Income										
E sti pol	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	ou have	nothing to rep	ort for	any lir	ne, write	\$0 in the	space.	Include	e your no	n-filing
f yo nore	u or your non-filing spouse have mo e space, attach a separate sheet to t	re than one employer, co his form.	mbine th	e information f	or all	employ	ers for th	nat perso	n on the	e lines	below. If	you need
						ŀ	or Debt	or 1		Debtor filing s	2 or pouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, c	y, and commissions (be alculate what the monthly	fore all p wage w	oayroll ould be.	2.	\$_	6,4	62.00	\$	7,	490.00	
3.	Estimate and list monthly overting	me pay.			3.	+\$_	500.00	(net)	+\$_	500.0	0 (net)	
4.	Calculate gross Income. Add line	e 2 + line 3.			4.	\$_	6,962	2.00	\$_	7,99	0.00	
									-			

	otor 1	Glenn E. Hiller April S. Hiller			4.00 11.00				
20.	0101 2	April 5. Tillier		Case number (if known)	1:20-bk-0	0308			
	Сор	by line 4 here	4.	For Debtor 1 \$6,962.00	For Debto				
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Life insurance Life insurance, disability	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	\$ 1,274.00 \$ 323.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$	1,460.00 748.00 0.00 346.00 369.00 0.00 0.00 0.00 103.00			
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$ 1,602.00	\$	3,026.00			
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 5,360.00		4,964.00			
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00			
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$	0.00			
10.		ulate monthly income. Add line 7 + line 9. 10 he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0. \$_	5,360.00 + \$_	4,964.00	= \$ 10,324.00			
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.	Add t Write applie	the amount in the last column of line 10 to the amount in line 11. The resul that amount on the Summary of Schedules and Statistical Summary of Certain is	lt is the	e combined monthly inc tities and Related <i>Data,</i>	oome. if it 12.	\$10,324.00			
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.				monthly income			
	V	Yes. Explain: Decrease. Both Debtors are nurses employed in M recent past due to the Covid pandemic. This over Mrs. Hiller. The net overtime for each is estimated increased Debtors' gross from the previous Sched taken.	time l at \$8	has ended for Mr. F 500.00 per month.	liller and w This unusu	vill soon end for			

Official Form 106I

Fi	ill in this informa	tion to identify	your case:						
	ebtor 1	Glenn E. Hi					Chook	if this is:	
1	L							if this is: In amended filing	
	ebtor 2	April S. Hill	er				A	supplement show	wing postpetition chapter
(3	pouse, if filing)						1:	3 expenses as of	the following date:
Ur	nited States Bankri	uptcy Court for the	e: MIDDL	E DISTRICT OF PENNSY	/LVANIA		M	IM / DD / YYYY	
1		20-bk-00308							
(If	known)								
С	Official Fo	rm 106J				i			
S	chedule	J: Your	Exper	nses					12/15
Be inf	e as complete a	ind accurate a ore space is ne	s possible eeded, atta	. If two married people a	re filing together, bo form. On the top of	oth are e any add	equall dition	ly responsible fo al pages, write y	
		be Your House	ehold	NINGS					
1.	ls this a joint	t case?							
	No. Go to ✓ Yes. Does		in a separ	ate household?					
	✓ No Ye		st file Offic	ial Form 106J-2, <i>Expense</i> :	s for Senarate House	hold of F)ehtor	• 2	
2.		dependents?			o rei Coparate i loase	noid of L	Jebioi	۷.	
۷.			-						
	Do not list De Debtor 2.	otor 1 and	✓ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor)	Dependent's age	Does dependent live with you?
	Do not state to dependents n				Daughter		\$	12	□ No ✓ Yes
					Daughter			17	No V Yes
					Daughter			19	No ✓ Yes
									No Yes
3.		people other t	han 🦳	No Yes				33167	res
	yoursell and	your depende	nts?						
	t 2: Estimat	te Your Ongoi	ng Monthly	y Expenses					
CXL	imate your exp censes as of a d clicable date.	enses as of you date after the b	our bankru oankruptcy	iptcy filing date unless y is filed. If this is a supp	ou are using this for lemental Schedule	rm as a J, check	suppl the b	lement in a Chap oox at the top of	oter 13 case to report the form and fill in the
Inc	ludo ovnemen	matal faces 200							
the	value of such a	paid for with t assistance an	າon-casn ເ d have inc	government assistance it luded it on <i>Schedule I: Y</i>	you know				
(Of	ficial Form 106	l.)	a maro mo	iadea it on ochedale i. 1	our income			Your expe	nses
						DOE:		•	3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3
4.	The rental or payments and	home owners any rent for the	nip expense ground or	ses for your residence. In lot.	nclude first mortgage	4.	\$		2,565.00
	If not included	d in line 4:							
	4a. Real est	ate taxes				40	¢		
	ADDICAL SOCIOENTE DE CENTRALE	, homeowner's	, or renter's	s insurance		4a. 4b.	-		0.00
	4c. Home m	aintenance, re	pair, and up	okeep expenses		4c.			<u>0.00</u> 240.00
	4d. Homeov	vner's associati	on or cond	ominium dues		4d.	-	***	0.00
5.	Additional mo	ortgage payme	nts for you	u r residence , such as hor	ne equity loans	5.	15		355.00

Official Form 106J

	btor 1		E. Hiller			
De	btor 2	April S	S. Hiller	Case nu	mber (if known)	1:20-bk-00308
_						
6.	Utilit		W. L4			
	6a.		ity, heat, natural gas	6a	. \$	279.00
	6b.		sewer, garbage collection	6b	. \$	33.00
	6c.	Telepho	one, cell phone, Internet, satellite, and cable services	6c	. \$	352.00
_	6d.	Other, S	Specify: Alarm system, Blue Flame, Kneppers	6d	. \$	84.00
7.	Food	and hou	usekeeping supplies	7	. \$	1,380.00
8.			d children's education costs	8		188.00
9.	Cloth	ning, laur	ndry, and dry cleaning	9		
10.	Pers	onal care	products and services	10		357.00
11.	Medi	cal and d	dental expenses		. \$	167.00
12.	Trans	sportatio	n. Include gas, maintenance, bus or train fare.		Ψ	255.00
	Do no	ot include	car payments.	12.	\$	1,208.00 ¹
13.	Enter	rtainment	t, clubs, recreation, newspapers, magazines, and books	13.	\$	908.00
14.	Chari	itable cor	ntributions and religious donations		\$	
15.	Insur	ance.			<u> </u>	8.00
	Do no	ot include	insurance deducted from your pay or included in lines 4 or 20.			
	iba.	Life insu	rance	15a.	\$	110.00
		Health in		15b.	\$	0.00
		Vehicle i		15c.		236.00
	15d.	Other ins	surance. Specify: Dott store property	15d.		
16.	Taxes	s. Do not	include taxes deducted from your pay or included in lines 4 or 20		·	336.00
	Speci	ty: Loca	al taxes	16.	s	46.00
17.	Instal	lment or	lease payments:			16.00
			ments for Vehicle 1	17a.	\$	0.00
			ments for Vehicle 2	17b.		0.00
	17c.	Other, Sp	Payment on Mrs. Hiller's retirement loan	17c.	\$	
	17d.	Other, Sp	pecify:	17d.		346.00 ²
18.	Your	payments	s of alimony, maintenance, and support that you did not report as	17 d.	Ψ	0.00
	deduc	cted from	Your pay on line 5. Schedule I. Your Income (Official Form 106)	18.	\$	0.00
19.	Otner	paymen	ts you make to support others who do not live with you.		\$	0.00
	Specif	fy:		19.		0.00
20.	Other	real prop	perty expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	20a.	Mortgage	es on other property	20a.		0.00
		Real esta		20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintena	ince, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowi	ner's association or condominium dues	20e.	ACTION AND ADMINISTRATION AND AD	0.00
21.	Other:	: Specify:		21.		0.00
22	Calcul	lata vour	monthly expenses		- Ψ	
44.	222 A	dd linos 4	through 21.			
					\$	9,423.00
	225. 0	det in oo	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22C. A	ad line 22	2a and 22b. The result is your monthly expenses.		\$	9,423.00
23.	Calcul	late vour	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	Φ.	
	23b.	Copy you	r monthly expenses from line 22c above.			10,324.00
		1-3 3	. Horning expended from line 226 above.	23b.	-\$	9,423.00
	23c.	Subtract v	your monthly expenses from your monthly income.			
	-	The result	t is your monthly net income.	23c.	\$	901.00**
				1		001.00
24.	Do you	u expect	an increase or decrease in your expenses within the year after you	u file this	form?	
	I UI EXA	Tiple, uo yo	ou expect to finish paying for your car loan within the year or do you expect your terms of your mortgage?	mortgage p	ayment to increas	se or decrease because of a
	No.		terms or your mortgage?			
	✓ Yes		Evolgin hora: Ingresse			
1	[K] 163		Explain here: Increase.			
			It is expected that one to two vehicles will need to be rep	laced so	on.	
			Second daughter will be entering college in the Fall of 20	21.	16.	
			Home maintenance is expected to increase, due to roof a	nd appli	ances being	over 15 years old.

Official Form 106J Schedule J: Your Expenses

¹Above average transportation expenses are incurred because Debtors travel approximately 200 miles per day for employment.

²This loan was incurred to purchase a vehicle needed for work and repayment is required.

Case number (if known)

1:20-bk-00308

**This amount includes \$1,000 per month in overtime, which has already terminated for Husband and is expected to terminate for Wife soon. Thus meaning that monthly income would actually result in a negative figure of approximately \$100.00. Also attached as an alternative Schedule J is a schedule listing tuition actually paid for one of their children. This alternative Schedule J shows a negative monthly income of almost \$1,500.00.

Fil	ll in this information to identify your case:							
De	Glenn E. Hiller		Check if this is:					
	btor 2 April S. Hiller			An amended filing A supplement show	ving postpetition chapter the following date:			
Un	ited States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSY	LVANIA	_		the following date.			
		LVAINIA	ľ	MM / DD / YYYY				
	1:20-bk-00308 known)							
<u></u>								
0	fficial Form 106J							
	chedule J: Your Expenses				12/1			
1111	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this	e filing together, both form. On the top of a	h are equa	lly responsible fo	or supplying correct			
nu	mber (if known). Answer every question.		, additio	nai pagos, wite y	our name and case			
Pai	rt 1: Describe Your Household Is this a joint case?							
1.	No. Go to line 2.							
	Yes. Does Debtor 2 live in a separate household?							
	✓ No Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 2 must file Official Form 106J-2, Expenses Yes. Debtor 3 must file Official Form 106J-2, Expenses Yes. Debtor 3 must file Official Form 106J-2, Expenses Yes. Debtor 3 must file Official Form 106J-2, Expenses Yes. Debtor 3 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must file Official Form 106J-2, Expenses Yes. Debtor 4 must	for Separate Househo	old of Debto	or 2				
2.	Do you have dependents? No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?			
	Do not state the				□No			
	dependents names.	Daughter		12	√ Yes No			
		Daughter	-	17	v Yes			
		Daughter		19	_ No ✓ Yes			
					No			
3.	Do your expenses include expenses of people other than		0		Yes			
	yourself and your dependents?							
Par								
Est	imate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppl	ou are using this form	as a supp	plement in a Chap	oter 13 case to report			
арр	licable date.	,	oncok the	box at the top of	the form and this in the			
Incl	ude expenses paid for with non-cash government assistance if	you know						
(Off	value of such assistance and have included it on <i>Schedule I: Yo</i> icial Form 106I.)	our Income		Your expe	nses			
	The sould be a second of the se		Co.Tai.Co.					
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		2,565.00			
	If not included in line 4:		•					
	4a. Real estate taxes		/a ¢		0.00			
	4b. Property, homeowner's, or renter's insurance		4a. \$ - 4b. \$		0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		240.00			
_	4d. Homeowner's association or condominium dues		4d. \$		0.00			
5.	Additional mortgage payments for your residence, such as home	ne equity loans	5. \$		355.00			

Official Form 106J

Schedule J: Your Expenses

Official Form 106.I

Schedule J: Your Expenses

¹Above average transportation expenses are incurred because Debtors travel approximately 200 miles per day for employment.

²This loan was incurred to purchase a vehicle needed for work and repayment is required.

Fill in this in	formation to identify your	case:		
Debtor 1	Glenn E. Hiller			
	Fralliams	Middle Name	Last Name	AND CARDON CONTRACTOR CONTRACTOR AND CARDON CONTRACTOR OF
Debtor 2	April S. Hiller			
(Spouse if, filing)	First No. 17.3	Middle Norre	Lass Nemo	
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number (fictions)	1:20-bk-00308	gallen er eine der ei		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

K.	Sign	1 Selow									
ľ	ld you pa _l	or agree to pay	someone who is	NOT an attorney to	o help	you fill out	bankrupto	y forms?		ikonferenciji (interneti prima karakteri po krijaka u karan politik na seri dungila i dan gulu	ones:
And a		lame of person		onnerform six reconstitut deserting de six formation entre deserve _{res} transmission deserve	entenna-jajon-jajo			Attach Sankruj Declaration, ar	otcy Patition I nd Signature (Preparer's Notice, (Official Form 119)	
U cc	donn	Mille	January Januar	read Schedule I an	d Sch	April S. H Signature o		eller	d that they a	are true and	Niesac.

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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